

DEPARTMENT OF VETERANS AFFAIRS Veterans Health Administration Washington DC 20420

IL 10-2004-001

In Reply Refer To: 13

February 6, 2004

UNDER SECRETARY FOR HEALTH'S INFORMATION LETTER

CLINICAL REMINDER REGARDING VETERANS OF THE RECENT CONFLICTS IN AFGHANISTAN AND IRAQ

1. <u>Purpose.</u> This Under Secretary for Health's Information Letter provides guidance to Department of Veterans Affairs (VA) health care providers who are evaluating veterans of the recent military conflicts in Afghanistan and Iraq.

2. Background

- a. Shortly after September 11, 2001, military personnel began deploying to Southwest Asia to liberate Afghanistan. In late 2002, additional military personnel were deployed to this region to liberate Iraq. Operation Enduring Freedom in Afghanistan and Operation Iraqi Freedom produced a new generation of war veterans who may be at increased risk of both medical and psychological illnesses due to complex deployment-related exposures. It is therefore important to screen these conflict veterans for unique health risks.
- b. Because VA is in the forefront of electronic medical record keeping, computer-driven "clinical reminders" are an ideal approach to provide targeted health care to the veterans of recent conflicts in Southwest Asia. Clinical reminders are clinical decision support tools that assist health care providers in complying with recommended care. VA's Computerized Patient Record System (CPRS) supports automated clinical reminders that assist clinical decision-making and instruct providers about appropriate care by providing links to educational materials. Electronic clinical reminders additionally improve documentation and follow-up by allowing providers to easily view when certain tests or evaluations were performed, as well as to track and document when care has been delivered.
- c. There are a number of benefits to creating nationally mandated clinical reminders. National reminders help standardize health care and ensure that experts have had input into how clinical care is delivered. Because of reporting mechanisms built into the CPRS clinical reminder system, national reminders facilitate system-wide assessment of performance and quality of care.
- d. This information letter describes a newly developed national clinical reminder, "Afghan & Iraq Post-Deployment Screen," designed to aid VA health care providers who are evaluating veterans of the recent conflicts in Southwest Asia. This clinical reminder will assist in providing new combat veterans with ongoing, high-quality health care in an environment structured to their

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unique needs and status. Although Iraqi Freedom veterans are eligible for the Gulf War Registry, clinical registries only assess veterans on the one occasion when they volunteer for a special examination. A much better approach is to ensure that all members of this unique group of veterans receive specialized care from the time they first present to a VA health care facility.

e. Veterans of recent military conflicts are being asked specifically about chronic, debilitating symptoms because these complaints were a major health problem for some veterans after the last Gulf War in 1991.

3. Guidance

a. **Identifying Veterans for the Afghanistan and Iraq Clinical Reminder.** Reminders are designed to apply to a given population and appear on a patient's CPRS screen, based on patient criteria found in a definable data field within CPRS. Once the Afghanistan and Iraq clinical reminder software patch is installed and the reminder is activated at a local facility, it will appear (pop-up) on the CPRS cover sheet for veterans presenting to a VA health care facility who served in the United States military after September 11, 2001, when these deployments began. Identified veterans will then be asked specifically whether they served on the ground, in nearby coastal waters, or in the air over Afghanistan and Iraq after September 11, 2001. If the veteran answers yes, the rest of the reminder dialogue will appear on the computer screen for completion by the health care provider.

b. Preventing Duplication

- (1) Because of increasingly widespread use of electronic clinical reminders across VA, there is concern that continued implementation of new reminders will cause undue burden to health care providers. To prevent duplication and unnecessary work, a health factor will be available that allows this Afghanistan and Iraq clinical reminder to be completed just once in the lifetime of a veteran. Importantly, the "Afghan & Iraq Post-Deployment Screen" will satisfy current clinical reminders for depression, alcohol abuse, and Post-traumatic Stress Disorder (PTSD) until the scheduled interval lapses for re-administration of these reminders. Consequently, veterans will not be asked the same questions again soon after the completion of this clinical reminder.
- (2) It was not possible to account for similar screening questions asked of veterans before this reminder comes into effect. However, this should be a rare problem because most veterans sent to Iraq or Afghanistan will be young troops who usually have not received VA health care. And for the veterans who have received VA health care in the past, this will have occurred at least 6 to 12 months previously, which is the usual length of deployment to these theaters of conflict.

c. Resolving the "Afghan & Iraq Post-Deployment Screen"

(1) Once a reminder pops-up on a computer screen in a VA health care facility, it needs to be resolved or will remain active. Reminders designate specific tasks or evaluations that need to be done or specific information that needs to be provided; and they designate what information, evaluation, or test results will turn off the reminder. Consequently, the reminder may trigger the

ordering of additional tests. Alternately, information provided as a result of the reminder may be sufficient to resolve it. This is the case for the Afghanistan and Iraq clinical reminder, which only involves specific screening questions. However, positive responses to these questions might direct the health care provider to perform a more extensive clinical evaluation or, in some cases, to order additional diagnostic tests.

- (2) For the Afghanistan and Iraq clinical reminder, all questions in the reminder have to be answered before it is resolved. The questions in this reminder address long-term medical and psychological health risks among veterans of recent conflicts in Afghanistan and Iraq. Reminders are programmed so that when they are resolved, specific information from the reminder is automatically downloaded into a progress note.
- d. **Activation.** The "Afghan & Iraq Post-Deployment Screen" was released on January 26, 2004, and needs to be installed in CPRS VA-wide by the end of February 2004. This modification of CPRS will enable VHA treatment facilities to reliably identify veterans of the recent conflicts in Afghanistan and Iraq and provide targeted health care.
- e. **Screening Questions.** Veterans of recent military conflicts are being asked specifically about chronic, debilitating symptoms because these complaints were a major health problem for some veterans after the last Gulf War in 1991.
- (1) The "Afghan & Iraq Post-Deployment Screen" begins with an introductory explanation and screening question to confirm the veteran's status as a participant of the recent conflicts in Southwest Asia (see Att. A).
- (2) The reminder then screens for risk factors associated with the development of PTSD (see Att. B).
- (3) The reminder next screens for risk factors associated with the development of depression (see Att. C).
- (4) The reminder next screens for risk factors associated with the development of alcohol abuse (see Att. D).
- (5) Finally, this clinical reminder screens for infectious diseases endemic to Southwest Asia and for chronic symptoms. This health problem is being targeted in this clinical reminder because infectious diseases, principally enteric infections, malaria, and leishmaniasis, can present after a veteran returns to the United States and even after separation from active duty. *NOTE: More information about relevant infectious diseases can be obtained in the VA Veterans Health Initiative teaching module, "Endemic Infectious Diseases of Southwest Asia," found at http://www.va.gov/vhi/.*

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- f. **Updating Reminder.** The National Clinical Practice Guideline Council (NCGPC) assesses all national reminders annually to see if changes or improvements are warranted. It reviews any comments from the field that have been collected and collated over the course of the year. Suggested modifications may be addressed to the VHA Office of Public Health and Environmental Hazards (13) at 202-273-8579.
- 4. <u>Contact.</u> Questions regarding this information letter may be addressed to the Environmental Agents Service (131) at 202-273-8579.

S/ Robert H. Roswell, M.D. Under Secretary for Health

Attachments

DISTRIBUTION: CO: E-mailed 2/10/04

FLD: VISN, MA, DO, OC, OCRO, and 200 – E-mailed 2/10/04

ATTACHMENT A

INTRODUCTORY EXPLANATION AND SCREENING QUESTION TO CONFIRM THE VETERAN'S STATUS

The "Afghan & Iraq Post-Deployment Screen" begins with an introductory explanation and screening question to confirm the veteran's status as a participant of the recent conflicts in Southwest Asia:

Afghan & Iraq Post-Deployment Screen

This template is designed to help identify health problems that are uniquely related to military service in Afghanistan and Iraq during recent hazardous combat operations. The questions target infectious diseases, mental health problems, and chronic symptoms which may develop in some veterans of Operation Enduring Freedom and Operation Iraqi Freedom.

SOME WEB LINKS HAVE BEEN PROVIDED FOR REFERENCE.

Office of Quality & Performance: Clinical Practice Guidelines

Medically Unexplained Symptoms: Pain and Fatigue (VA-DOD Guideline)

Major Depressive Disorder (VA-DOD Guideline)

Clinical Care: Mental Health
Outlines in Clinical Medicine
Environmental Agents Service

(also links to Veterans Health Initiatives)

Did the veteran serve in Iraq or Afghanistan, either on the ground or in nearby coastal waters, or in the air above, after September 11, 2001?

No No service in or over Iraq or Afghanistan
Yes Service in or over Iraq or Afghanistan
(completion of screening required)

ATTACHMENT B

SCREENING FOR RISK FACTORS ASSOCIATED WITH THE DEVELOPMENT OF POST-TRAUMATIC STRESS DISORDER (PTSD)

This reminder then screens for risk factors associated with the development of post-traumatic stress disorder (PTSD).

1.	SCREEN FOR PTSD		
	answer all questions		
	Have you ever had any experience that was so frightening, horrible, or upsetting that, in the past month, you:		
	Have had any nightmares about it or thought about it when you did not want to? (No) (Yes)		
	Tried hard not to think about it; went out of your way to avoid situations that remind you of it? (No) (Yes)		
	Were constantly on guard, watchful, or easily startled? (No) (Yes)		
	Felt numb or detached from others, activities, or your surroundings?(No)(Yes)		
scre	RESULTS OF PTSD SCREENING (a 'yes' answer to two or more of the above questions is a positive creen)		
	PTSD Screen Negative		
	PTSD Screen Positive		

ATTACHMENT C

SCREENING FOR RISK FACTORS ASSOCIATED WITH THE DEVELOPMENT OF DEPRESSION

This reminder, next screens for risk factors associated with the development of depression.

2.	. SCREEN FOR DEPRESSION		
	DEPRESSION SCREEN (2 questions screen)		
	1. During the past month, have you often been bothered by feeling down, depressed, or hopeless?		
	2. During the past month, have you often been bothered by little interest or pleasure in doing things?		
	A "Yes" response to either question is a POSITIVE screen for depression. Further evaluation is then needed.		
	Depression Screen Negative		
	Depression Screen Positive		

ATTACHMENT D

SCREENING FOR RISK FACTORS ASSOCIATED WITH THE DEVELOPMENT OF ALCOHOL ABUSE

This reminder, next screens for risk factors associated with the development of alcohol abuse.

3.	SC	REEN FOR ALCOHOL
	In	the past 12 months, has the patient had any drinks containing alcohol?
	ci	hoose one
		Yes (Perform AUDIT-C)
		No no alcohol in the past 12 months
		Patient declined to answer questions about alcohol use.
		ample: The patient reports having consumed alcohol in the past year. An alcohol eening test (AUDIT-C) was positive (score = 3).
	1.	How often did you have a drink containing alcohol in the past year?
	2.	How many drinks containing alcohol did you have on a typical day when you were drinking in the past year?
	3.	How often did you have six or more drinks on one occasion in the past year?

ATTACHMENT E

INFECTIOUS DISEASES ENDEMIC TO SOUTHWEST ASIA

Finally, this clinical reminder screens for infectious diseases endemic to Southwest Asia and for chronic symptoms. This health problem is being targeted in this clinical reminder because infectious diseases, principally enteric infections, malaria, and leishmaniasis can present after a veteran returns to the United States and even after separation from active duty. *NOTE: More information about relevant infectious diseases can be obtained in the VA Veterans Health Initiative teaching module, "Endemic Infectious Diseases of Southwest Asia," found at http://www.va.gov/vhi/.*

4.	SCREEN FOR INFECTIOUS DISEASES AND CHRONIC SYMPTOMS
	answer all 4 questions
	Do you have any problems with chronic diarrhea or other gastrointestinal
	complaints since serving in the area of conflict?(No)(Yes)
	(If yes, the patient's stool should be evaluated for ova and parasites because of high rates of giardiasis and amebiasis in Southwest Asia).
	Do you have any unexplained fevers?(No)(Yes)
	(If yes, the patient should be evaluated for malaria and possibly visceral leishmania infection because of high rates of these diseases in Southwest Asia. Amoebic infection should again be considered.)
	Do you have a persistent papular or nodular skin rash that began after deployment to Southwest Asia?(No)(Yes)
	(If yes and an unusual rash or lesion is verified, the patient should be evaluated for cutaneous leishmaniasis.)
	Have you had any physical symptoms, such as fatigue, headaches, Muscle and/or joint pains, forgetfulness, for three months or longer that have interfered with your normal daily activities at home or work?
	(No)(Yes)